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CONFIRMATION NO. 4655

Bib Data Sheet

SERIAL NUMBER 09/846,939	FILING DATE 04/30/2001  RULE	CLASS 717	GROUP ART UNIT 2124	ATTORNEY DOCKET NO. 3339	
APPLICANTS Yi-Jen Cheng, Hsinchu, TAIWAN; Deng-Kai Yang, Hsinchu, TAIWAN;  ** CONTINUING DATA ***** NO/C.M.  ** FOREIGN APPLICATIONS ***** Yes/C.M. TAIWAN 89125261 11/28/2000  IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/27/2001					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance met Verified and Acknowledged		STATE OR COUNTRY TAIWAN	SHEETS DRAWING 4	TOTAL CLAIMS 7	INDEPENDENT CLAIMS 1
ADDRESS 21302 KNOBLE, YOSHIDA & DUNLEAVY EIGHT PENN CENTER SUITE 1350, 1628 JOHN F KENNEDY BLVD PHILADELPHIA, PA 19103					
TITLE Method for developing testing program of tester					
FILING FEE  RECEIVED 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:				
<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input checked="" type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit					



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<b>APPLICANTS</b> Yi-Jen Cheng, Hsinchu, TAIWAN; Deng-Kai Yang, Hsinchu, TAIWAN;					
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Verified and Acknowledged Examiner's Signature _____ Initials _____					
<b>ADDRESS</b> Niro, Scavone, Haller & Niro Suite 4600 181 West Madison Chicago, IL 60602-4515					
<b>TITLE</b> Method for developing testing program of tester					
<b>FILING FEE RECEIVED</b> 710	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		